

# BUSINESS FACILITIES STATEMENT

MV2845 11/2000

Wisconsin Department of Transportation  
Dealer Section  
4802 Sheboygan Ave.  
P.O. Box 7909  
Madison, WI 53707-7909  
608-266-1425

Legal Business Name
Business Address
Date Facilities Will Be Ready

## Business Facility Requirements \* Note: Items 3, 4 and 5 do not apply to wholesalers of used vehicles

- ☐ 1. A permanent building, not a residence, tent or temporary stand.
- ☐ 2. An office within the building.
- ☐ 3. \*A minimum 12 x 20 foot area accessible for automobile display, repair and preparation within the building.
- ☐ 4. \*For motorcycle dealers only, an area of sufficient size to display, repair and prepare at least three motorcycles.
- ☐ 5. \*A repair shop on the premises; OR
  - ☐ A service agreement with a nearby repair shop. Copy of service agreement attached.
- ☐ 6. An outdoor vehicle display lot adjacent to the business office; OR
  - ☐ All vehicles are displayed indoors.
- ☐ 7. The building and premises comply with all local zoning, building code and permit requirements.
- ☐ 8. An exterior business sign with business name as it will appear on the license certificate and any other name used to do business under. The lettering of the sign must be a minimum of 4 inches high, unless smaller dimensions are required by local zoning or sign ordinance.
- ☐ 9. A sign posted on or adjacent to the entrance door describing business hours. Note: Wholesalers must also post notice that sales are restricted to licensed dealers only.
- ☐ 10. A signed lease agreement for the business location, valid at least through the two-year licensing period, unless the business property is owned by the dealership entity. Copy of lease attached.

## Is more than one motor vehicle business located at this address?

- ☐ No
- ☐ Yes - If yes, describe other business(es).

There are two additional facilities requirements for businesses that share facilities:

- ☐ 1. A vehicle display lot which is separate from areas used by the other business(es).
- ☐ 2. A copy of the lease agreement between the owner of the property and the dealer along with a diagram of how the facilities are shared between the businesses.

If an inspection determines that the business facilities do not meet the requirements, I will voluntarily surrender the dealer license, plates, salesperson/representative licenses and BID cards issued. I will discontinue operating as a dealer until an inspection verifies that the facilities are in compliance.

I declare that this is a true and accurate statement. I realize that my place of business is subject to inspection and any false statements regarding the above requirements will subject my license to revocation, suspension or denial. I, as owner, partner, officer of the corporation, association member, LLC member or LLC manager have authority to sign this statement.

I certify that the place of business listed above meets or will meet all the requirements under Trans 138.03 of the Wisconsin Administrative Code. The facilities will be ready on the above-indicated date.

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Title)